ERNS INCIL	DENT NOTIFICATION	ON REPORT	Regional Case Num	ber:	
	: 10/19/02 Time #	HVMM): 1350	Multiple Report:	Regional Time (HUMM):	
Recorded By:	Ross Kwens		Multiple Regional Ca	Multiple Regional Case Number:	
Through NRC	NRC Case Number:		SSI Report:	CR Number:	
A. REPORTER  'Privacy Act	Confidentiality Requested: Organization Name:	*Reported By:	Arrov i	Post worker	
Organization: (Che	ok One) Discharger [X	Public State Lox	zai ∏Federai ∭Unk		
*Address:			3/1	one: ( ) ext	
City:		County:		State: Zip:	
B. DISCHARGER		panization: (Check One)	Private Co. Public	State Local Federal Uni	
Discharger Name: Contact Name:	Kennansan	e Maf		one: ( ) ext.: 1 Phone: { } ext.:	
	939	,		cility ID Number:	
City: Du		County: Man	nace control of the c	MI Zip:	
C. INCIDENT		et or Approx. Location:			
LOCATION	Same As B	<u> </u>			
_ty:		County:	State:	Zip: Milepost:	
D. DATE	Discovery Date (mm/dd/yy):	Spi	Il Date (mm/dd/yy): Last	- Year Spill Time (HH/MM):	
E. MATERIAL	Material Type: (Check One)	Unknown 🔽 Oil		Other	
	Material Name	CHRIS CAS	No. UN DOT No.	Quantity Units (Circle One) Quantity In V	
1. Press	Oil (Bunn	5)		3BLs it by drm unk	
2 Misc.	Toxics.			PILS ib bbi drm unk gal ton oth	
3.				its but dem was gair san oth	
F. SOURCE	Source of Spill: (Check Any)		Railway Pipeline Vessel Offshore	UST Fixed Facility Other	
Vehicle ID or Carri	er No.:	Number of Tanks:	Tank Capacity:	Tank Units: (Circle One) to bbi drm	
Source Description	Manntrotan	nits Compl	n-4 - B	menunt	
G. MEDIUM	Medium Affected: (Check Any)		🖂 Lamod 🔲 Gro	oundwater Other hin Facility Unknown	
Vaterway Affected	:				
H. CAUSE	Reported Cause: (Check Any)	Transportation Equipment F		ional Error Dumping Othe	
Cause Description:	Buried Dr			ped liquids	
I. DAMAGE	No. of Injuries:	None No. c' De	aths:	None Property Damage>\$50,000:	
J. ACTIONS	Evacuation: Respon	se Actions Taken:			
	<del></del>				
K. NOTIFIED	Callet Has Notified: (Ches &		State/Local Dis	charger USCG Other Unkn	
Agency Name:		<u> </u>	<u> </u>		
L,COMMENTS	Comments: @///e/	L BOWN PA	u shone	-a.x-1/-	
Wester					
				Additional Information (See Reverse Side)	
M. RESPONSE	Response Comments: 4	been pu	mr. Ele	lot.	
AND EVALUATION	9	of Shatial	and Bo	line	
Agency Name:	(Chi	ch One) Local Stat	e Discharger	Federal FPA Other Unk	
Acancy Name:				Federal EPA Other Unk	
Agency Name:	US EPA RECORDS CENTER REGI	ON 5 Local Stat		Federal EPA Other Unk	
e danie dani	434762		and Inspirate the	A social First CLW First Charles of Committee	

<b>REGION 5 INC</b>	IDENT NOTIFICA	ATION REPORT	Regional Case Nun	nber:		
M. RESPONSE	Emergency Response Activity Within 24 Hours: Emergency Response Activity Date: (mm/dd/yy)  Responding OSC:					
AND EVALUATION						
hazardous substa start of a remova Note that the time type activities an	nce inicident notification laction; or OSC participe frame of 24 hours for d'une d'une voo o	n. Such actions inclu- pation in emergency re- response is used, as op- pen-ended. These act	de OSC field investigat esponse field simulation pposed to "hours or day tivities will only be cou	OSC within 24 hours of receipt of an oil or ions, OSC on-scene monitoring, and the as.  s," in order to capture first responder need when they are performed in the exercises do not count. Training		
do not count as a		r this measure. The p	surpose of this measure	nce Team (TAT) investigations, is to identify and track emergency		
Incident Si (Check Or		lassic Incident	Critical Incident	Non-Critical Incident ial Action Field Simulation		
Release Investiga	tion By OSC:	On-Scene Monito	oring By OSC:	Telephone Assistance:		
REGION-SPECIFIC	Referred To:  SDWA RCRA Enforcement TSCA	Crim. Inv. State Regional Counsel Public Affairs	Remedial	Oil Fund Used:		
FOLLOW-UP	Update Date: (mm/ddyy)		Updated By:			
C. INCIDENT LOCATION /	Dun & Bradstreet No.:					
F. SOURCE	Source Code:		·			
G. MEDIUM	Medium Code:		Threat Code(s):			
H. CAUSE	Cause Code:					
J. ACTIONS \	No. of Persons Evacuated			e di jan <sup>in</sup> asione e a		
M. RESPONSE	Action Memo Date: (mm/d	ld/yy)	Action Memo Approved	POLREP Date: (mm/dd/yy)		
EVALUATION	TDD No.:		Enforcement Activities:			
Other Follow-up Comm	nents:		•			
			``			
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		ter i e tera de la				
		e de la companya del companya de la companya del companya de la co				